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CONFIRMATION NO. 1307

<b>SERIAL NUMBER</b> 10/780,415	<b>FILING OR 371(c) DATE</b> 02/17/2004 <b>RULE</b>	<b>CLASS</b> 548	<b>GROUP ART UNIT</b> 1626	<b>ATTORNEY DOCKET NO.</b> LA0087A CIP
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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CIP of 10/438,722 05/15/2003 ABN which claims benefit of 60/381,616 05/17/2002 and claims benefit of 60/406,711 08/29/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\*****IF REQUIRED, FOREIGN FILING LICENSE GRANTED****\*\* 05/08/2004**

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 0	TOTAL CLAIMS 21 6	INDEPENDENT CLAIMS 6 1
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Met after Allowance				
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>RJ</i>				

**ADDRESS**

23914

**TITLE**

Bicyclic modulators of androgen receptor function

<b>FILING FEE RECEIVED</b> 1176	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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